

ISSUE SLIP STAPLE AREA (for optional cross references)

705

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Bm		10-19-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	KC	703	U/15601

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
I Interference
A Appeal
O Objected

Claim	4	Date
Final		
Original		
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If more than 150 claims or 10 actions
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6/6/01

Best Available Copy